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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	30310-US-548
	First Named Inventor	MAYEUX, Jerry V.
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	March 10, 2004
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PAIN BALM

(Title of the Invention)

the specification of which

☒ is attached hereto OR as United States Application Number or PCT International

☐ was filed on (MM/DD/YYYY) (if applicable).

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/453,548	03/10/2003	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

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Name Deborah A. Peacock

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Country US Telephone (505) 998-1500 Fax (505) 243-2542

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Jerry V.

Family Name or Surname Mayeux

Inventor's Signature

Date

Residence: City Deming State NM Country US Citizenship US

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Mailing Address

City Deming State New Mexico ZIP 88030 Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's Signature

Date

Residence: City State Country Citizenship

Mailing Address

Mailing Address

City State ZIP Country

☐ Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	March 10, 2004
First Named Inventor	MAYEUX, Jerry V.
Title	PAIN BALM
Group Art Unit	
Examiner Name	
Attorney Docket Number	30310-US-548

I hereby appoint:

☒ Practitioners at Customer Number

05179

Place Customer
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OR

☒ Practitioner(s) named below:

Name	Registration Number
Deborah A. Peacock	Reg. No. 31,649
Vidal A. Oaxaca	Reg. No. 44,267

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Jerry V. Mayeux

Signature

Date , 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

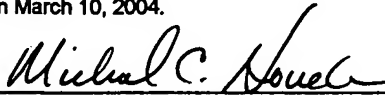
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PATENT APPLICATION

I hereby certify that this transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 via Label No. EV402863628US, on March 10, 2004, addressed to:

MAIL STOP: Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on March 10, 2004.



Michael C. Houck, Paralegal

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. :
Applicant : MAYEUX, Jerry V.
Filed : March 10, 2004
Title : PAIN BALM

Docket No. : 30310-US-548
Confirmation No.

Mail Stop: PATENT APPLICATION
Commissioner for Patents
United States Patent and Trademark Office
PO Box 1450
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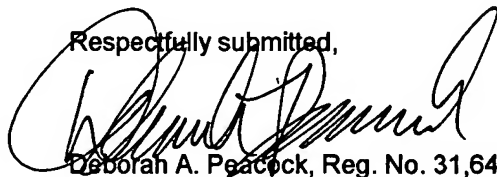
ASSOCIATE POWER OF ATTORNEY

Dear Sir:

Deborah A. Peacock, a principal attorney in the above-identified application for Letters Patent, hereby appoints as associate attorneys with full power:

Jeffrey D. Myers, Reg. No. 35,964
Paul Adams, Reg. No. 21,096
Rod D. Baker, Reg. No. 35,434 and
Stephen A. Slusher, Reg. No. 43,924 and
Vidal A. Oaxaca, Reg. No. 44,267.

Respectfully submitted,



Deborah A. Peacock, Reg. No. 31,649
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Date: March 10, 2004

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